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Attorney's Docket No. 18116

Patent

In re the Application of: Zimmer et al.

(inventor(s))

Application No.: 10/748,502

Filed: December 30, 2003

For: SYSTEM SOFTWARE TO SELF-MIGRATE FROM A FAULTY MEMORY LOCATION TO A SAFE MEMORY LOCATION

(title)

Mail Stop Amendment
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

SIR: Transmitted herewith is a **Response and Amendment** for the above-referenced application.

Applicant claims small entity status. See 37 CFR 1.27.

No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amd.		Highest No. Previously Paid For	Present Extra
Total Claims	* 24	Minus	** 22	2
Indep. Claims	* 4	Minus	*** 3	1
<input type="checkbox"/>	First Presentation of Multiple Dependent Claim(s)			

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

SMALL ENTITY

Rate	Additional Fee
X25	\$
X100	\$
+180	\$
Total Add. Fee	\$

**OTHER THAN A
SMALL ENTITY**

Rate	Additional Fee
X50	\$ 100
X200	\$ 200
+360	\$
Total Add. Fee	\$ 300

FIRST CLASS CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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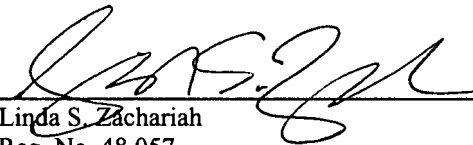
05-21-07
Date

- ☒ Two checks in the amount of \$200.00 and \$100.00 are attached for presentation of additional claim(s).
- ☐ Applicant(s) hereby Petition(s) for an Extension of Time of _____ month(s) pursuant to 37 C.F.R. § 1.136(a).
- ☐ A check for \$ _____ is attached for processing fees under 37 C.F.R. § 1.17.
- ☐ Please charge my Deposit Account No. 02-2666 the amount of \$ _____.
- ☐ A duplicate copy of this sheet is enclosed.
- ☒ The Under Secretary of Commerce for Intellectual Property and Director of the United States Patent and Trademark Office is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-2666 (a duplicate copy of this sheet is enclosed):
- ☒ Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of extra claims.
- ☒ Any extension or petition fees under 37 C.F.R. § 1.17.

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

Date: 5.21.07

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